

State of Idaho
Department of Water Resources

THIS BLOCK FOR DEPT USE ONLY:
Application
No. _____
± Approved ± Denied ± Canceled ±
Withdrawn
Cardholder I.D. No. _____ Issued _____

APPLICATION FOR CLASS II OPERATOR'S PERMIT

To be completed by the Principal Driller and Applicant

SECTION A - TO BE COMPLETED BY CLASS II OPERATOR APPLICANT:

1. Applicant's Last Name _____ First Name _____ Middle Name or Initial _____
Street Address or PO Box _____
City _____ State _____ Zip _____ Phone _____
2. Date of Birth: _____ Place of Birth: City _____ State _____ Country _____
3. If you have not passed an Idaho examination for operators, show the date you wish to be examined:

You must contact a regional office to actually schedule the exam. If you must cancel an exam you have scheduled, please notify the Region Office in advance of the scheduled exam about the cancellation.

4. Indicate and attach documentation of the following:
Number of wells drilled by you: _____
Type of wells drilled by you: _____

Length of time spent actually operating drilling equipment: Years _____ Months _____
Other well drilling related experience: Years _____ Months _____ Describe _____

5. I certify that I will comply with the Idaho Statutes and Department Rules and will construct wells only with adequate supervision as defined by Idaho Well Driller Licensing Rules (37.03.10.010.02) during Critical Phases of Construction as defined by the Rules (37.03.10.010.013). I certify that this application is true and correct to the best of my knowledge.

(Date)

(Signature of Class II Operator Applicant)

SECTION B - TO BE COMPLETED BY THE PRINCIPAL DRILLER:

1. Name of Drilling Company employing the applicant: _____
2. Drilling Company License Number: _____
3. Principal Driller of the Drilling Company: _____
City _____ State _____ Zip _____ Phone _____
4. I certify that I or another Licensed Driller employed by the company described above will provide adequate supervision, as defined by Idaho Well Driller Licensing Rules, to the Class II Operator making this application during Critical Stages of Construction as defined by the Rules. I certify that this application is true and correct to the best of my knowledge.

(Date)

(Signature of Principal Driller of the Drilling Company)

DEPT USE ONLY:

Receipt No. _____ Fee _____ Date _____ Received by _____
Check here: ± If fee not required as applicant is presently permitted as a Class I Operator.

238-3A
8/3/2000 (LDT)

State of Idaho
Department of Water Resources

**INSTRUCTIONS FOR APPLYING FOR
A CLASS II OPERATOR'S PERMIT**

CLASS II OPERATORS require adequate supervision as defined in the Idaho Well Driller Licensing Rules at each well site from a Licensed Driller employed by the drilling company.

1. An Application for Class II Operator's Permit (Form 238-3) must be completed and signed by both the Class II Operator applicant and the Principal Driller of the Company employing the applicant. The completed and signed application must be submitted to a Department of Water Resources' Region Office.
 ~~✓~~ The Class II Operator to complete Section A of the application.
 ~~✓~~ The Principal Driller to complete Section B of the application.
 Note: Submitting the application to the State Office may hold up the processing of the application.
2. Fee: No fee is required if the applicant is presently permitted as a Class I Operator, but the expiration date of the permit when converted to a Class II Operator's permit will remain as originally issued. If the applicant does not presently hold a valid Class I Operator's permit, a \$25.00 nonrefundable fee must accompany the Application for Class II Operator's Permit.
3. The Idaho Operator's exam must be taken and passed.
4. Documentation that the applicant has successfully constructed a sufficient number of wells, or has constructed wells for a sufficient length of time, or a combination of both to demonstrate competency is required. This is to be documented in Section B of the application.
5. The applicant is NOT authorized to operate drilling equipment or related equipment until a Class II Operator's Permit card has been issued by the Department.
5. The applicant must meet all requirements before a Class II Operator's Card will be issued.

TO SCHEDULE AN OPERATOR'S EXAM, CALL ONE OF THE FOLLOWING REGION OFFICES:

Idaho Department of Water Resources
Western Region Office
2735 Airport Way
Boise, ID 83705-5082
Phone: (208) 334-2190

Idaho Department of Water Resources
Northern Region Office
1910 Northwest Blvd. Suite 210
Coeur d'Alene, ID 83814-2615
Phone: (208) 769-1450

Idaho Department of Water Resources
Eastern Region Office
900 N. Skyline Drive, Suite A
Idaho Falls, ID 83402-1718
Phone: (208) 525-7161

Idaho Department of Water Resources
Southern Region Office
1341 Fillmore Street, Suite 200
Twin Falls, ID 83301-3380
Phone: (208) 736-3033